348000 | D20914 ETATS -UNIS

## Rec'd PCT/PT@ 21 JUL 2005

Attorney Docket No DECLARATION	N AND POWER	OF ATTORNE	Y FOR PATE	ENT APPLIC	CATION	
As a below named inv	entor, I hereby de	eclare that:				
My residence, mailing	address and citiz	zenship are as state	ed below next	to my name.	,	
I believe I am the original, first and joint claimed and for which	inventor (if plur	al names are listed	d below) of the			;
A CUTTING HE	CAD FOR A BR	USH CUTTER, 1	EDGE TRIM	MER OR SI	MILAR	
	eto anuary 23,2004-	as United States A 04/000819 and w			rnational licable).	
I hereby state that I has specification, including						
I acknowledge the duty CFR 1.56, including for available between the filing date of the contin	or continuation-in	n-part applications prior application a	s, material info	rmation which	h became	37
I hereby claim foreign foreign application(s): any PCT international States of America, list application for patent, application having a fi	for patent, invent application whic ed below and hav inventor's or plan	or's or plant breed h designated at leave also identified but nt breeder's rights	ler's rights cert ast one country below, by check certificate(s),	tificate(s), or y other than the king the box, or any PCT I	365(a) of he United , any foreig nternationa	
Prior Foreign Application Number(s)	Country	Foreign Filing Date (MM/DD/YYYY)	Priority Not Claimed	Certified Copy		
0300713	FRANCE	01/23/2003		Yes	No .	

I hereby declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true; and further that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment, or both, under 18 U.S.C. 1001 and that such willful false statements may jeopardize the validity of the application or any patent issued thereon.

POWER OF ATTORNEY: As a named inventor, I hereby appoint the practitioners associated with the Customer Number provided below to prosecute this application and to transact all business in the Patent and Trademark Office connected therewith, and direct that all correspondence be addressed to that Customer Number:

## **Customer Number**

Registration No.

		Tel Fax		
Full name of Inventor's Signature: Residence: Citizenship: Mailing Add	X	VHLLENEUV French	Date:	June 200'
Full name of Inventor's Signature: Residence: Citizenship: Mailing Add			Date:	
Full name of Inventor's Signature: Residence: Citizenship: Mailing Add			Date:	
Full name of Inventor's Signature: Residence: Citizenship:			Date:	<u>.</u> .

Direct telephone calls to: